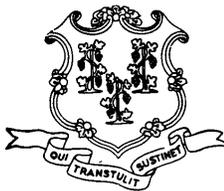


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 License Services Division
 165 Capitol Avenue
 Hartford, CT 06106
 Email: dcp.licenseservices@ct.gov
 Web site: www.ct.gov/dcp



For Official Use Only

Application to Conduct a Carnival

Instructions

- Print or type all information.
- A fee of **\$200.00 for each application** must accompany this form and be made payable to “*Treasurer, State of Connecticut.*”
- The completed **Proof of Financial Responsibility Form from the Department of Insurance** must be included with this application or on file with the Department of Consumer Protection for the year.
- **Applications must be submitted to the Department of Consumer Protection at least ten (10) days prior to the event.** Return the completed application(s) with the applicable fee(s) and documentation to the above address.
- All inspections will be conducted by the Department of Emergency Services & Public Protection (DESPP).

Company Information

Name of Company Contracted to Conduct Event			
Street Address		City	State Zip Code
FEIN	Email Address		Telephone Number

Sponsoring Organization

Name of Sponsoring Organization			
Street Address		City	State Zip Code
Name of Sponsor’s Representative			Telephone Number

Event

Location of Event			
Street Address		City	State Zip Code
Dates of Event	Number of Rides	Requested Inspection Date	Requested Inspection Time

Signature

_____ <i>Signature of Applicant</i>	_____ <i>Title</i>	_____ <i>Date</i>
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